

FMS Foundation Newsletter

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September 1, 1995

Dear Friends,

The headlines tell the story of FMS this summer. Legal decisions dominated the issue and thus the questions we are asked. If there was a summer lull somewhere, it forgot to come to the Philadelphia FMSF office.

"\$2.5 M for fake sex-abuse memories."

Philadelphia Daily News, August 2, 1995

"BC Court orders new trial on repressed memories."

Vancouver Sun, July 12, 1995

"Court overturns child-molestation conviction."

Fresno Bee, August 10, 1995

"Federal jury awards \$850,000 in damages to family in therapist's malpractice case."

Bangor Daily News, August 10, 1995

"False Memory' lawsuit upheld by U.S. judge"

The Legal Intelligencer, July 26, 1995

"Grandparents lose round in abuse case"

The Boston Globe, August 18, 1995

"Careful Guide in Dispute on False Memory"

San Francisco Chronicle, August 14, 1995

What will be the long-term effect of a \$2.5 million award in a recovered memory malpractice case? Christopher Barden, a lawyer representing the retractor, commented that the verdict is *"a stunning warning to therapists...and to insurance companies in that they had better start obeying the informed-consent laws and stop using experimental treatments like recovered-memory treatments on patients without their permission."*

The overturning of the Donna Sue Hubbard mid-80s case is another in a significant pattern of overturning day-care case convictions such as Kelly Michaels (Wee Day Care) and the Kellys (Little Rascals). The new decisions rest, in part, upon a clearer understanding of interviewing techniques and the reliability of memory.

The responsibility of therapists to third parties is an area in which the courts are making decisions that may eventually affect many families who have lost their children, grandchildren and reputations to FMS.

The denial of an appeal by Ray and Shirley Souza, on the other hand, will disappoint many families. The Souzas, convicted of molesting their grandchildren and under house arrest for more than two years, plan other appeals.

FMS Foundation data indicate that in the U.S., 90% of the recovered repressed memory lawsuits are civil suits of which two-thirds are dropped, dismissed or concluded in favor of the accused. Foundation records for 1994 indicate that one in twelve criminal cases resulted in a conviction.

After three years of learning about memory and suggestibility, FMSF families and friends can now see how memory research is being applied in the legal arena.

Pamela

American Psychological Association Paper

The American Psychological Association issued a paper called, "Questions and Answers about Memories of Childhood Abuse," on August 10. The paper uses some of the material prepared by the APA Working Group on the Investigation of Memories of Childhood Abuse, but that group did not write this paper. It reiterates the critical point that "it is impossible, without other corroborative evidence, to distinguish a true memory from a false one."

The paper notes that "experienced clinical psychologists state that the phenomenon of a recovered memory is rare." It states later that "The reality is that most people who are victim of childhood sexual abuse remember all or part of what happened to them." That coincides with our understanding of the research.

The paper also notes that, "For ethical and humanitarian reasons, memory researchers do not subject people to a traumatic event in order to test their memory of it. Because the issue has not been directly studied, we can not know whether a memory of a traumatic event is encoded and stored differently from a memory of a nontraumatic event."

We are perplexed by the assertion that "the issue has not been directly studied." A solid body of research exists that examined people who had witnessed naturally occurring horrible events such as seeing parents murdered or who had experienced other disasters. These people remembered.

Another body of research has shown that any psychiatric condition associated with stress can result in the secretion of substances in the brain which may damage the hippocampus. We know that highly emotional situations affect memory. While more research is surely valuable, real traumatic experiences have been studied.

This APA report, which is in question-and-answer format, also includes sections on how memory works, suggestions for research and criteria for selecting a psychotherapist. The full report is available from the APA.

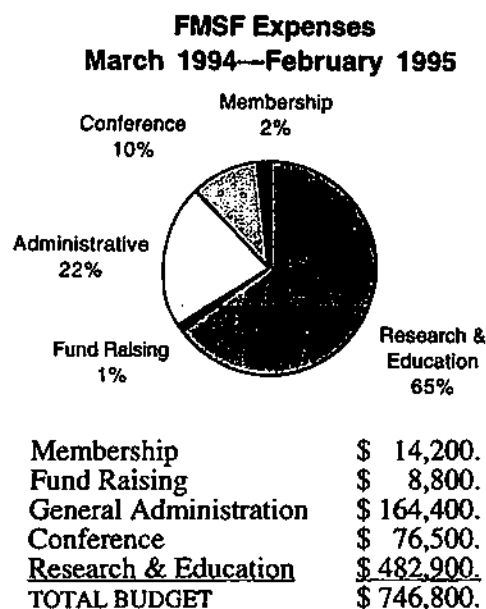
What prompts a person to question an abuse memory?
One man wrote the following:

"I began to doubt that the memories I had retrieved in therapy were real after reading Dr. Pittman's article in the April 1995 Psychology Today and the article in the Readers Digest on page 81 of the July 1994 issue entitled, 'Donna and the Therapy Police,' which I read this past April...[I began to question because] stories of voodoo arose and that my family was involved in it and there was child sacrifice. This started by using nightmares that I could remember having before I started to school."

Along with legal decisions and statements from professional organizations, the popular press is a powerful influence in retractions.

FMSF Audit

The external audit of the Foundation has been completed for the fiscal year 1994-1995, which extends from March 1 to February 28. Approximately 75% of Foundation expenses were spent for program services such as helping both families and professionals locate the resources they need, providing educational material to selected groups and to students, FMSF Newsletter, Speakers' Bureau, legal resources, contacting state volunteers, publishing papers, maintaining the video and article archives and, when needed, providing a sympathetic ear. The 25% for support services includes such expenses as administrative and office staff salaries, phone lines and rent. The chart below shows the percentage of money spent in each category. Below the chart are the actual dollar amounts. A complete audited statement is available in the FMSF office in Philadelphia.



Insurers spurn anyone in therapy

The Boston Globe, April 3, 1995

Alison Bass

Individuals who apply for disability insurance will probably be turned down if they have been in psychotherapy within the past five years. This does not hold for those in group plans. At recent hearings held by the National Association of Insurance Commissioners in Miami...commissioners heard testimony from people who had been denied life or health insurance solely because they had sought counseling or been victims of childhood abuse.

"If we had a method of separating those who become better as the result of psychotherapy vs. those who won't be better from it, that would be great," said a vice president of the Paul Revere Companies, an insurance underwriter.

Starting in 1988, claims on the basis of mental and nervous and drug and alcohol-related conditions increased almost 300 percent.

Washington State Therapist's License Suspended

Seattle Times, August 4, 1995

In what appears to be the first case in which a state monitoring agency has taken action in a third party complaint, the state has suspended the license of a therapist for five years and fined her \$5,000 because she acted incompetently in concluding that a mentally-ill patient had suffered sexual and ritual abuse as a child. The therapist, Linda MacDonald, who was interviewed on the Frontline documentary in April, "validated...memories of alleged childhood ritual and sexual abuse without either seeking to confirm by any other means or exploring alternative explanations or interpretations for the memories," the state Health investigators had written. The complaint was filed by Chuck Noah, whom many know because he has picketed some therapists' offices in Seattle.

All but three months of the suspension and \$500 of the therapist's fine have been suspended as long as she follows several conditions. She must take more courses and she may not work alone. She must be supervised and the supervisor must file reports to the state assessing the therapist's performance.

Some Attack FMSF at the American Psychological Association Annual Conference

The American Psychological Association held its annual conference in New York City in August. This is a huge conference with thousands of psychologists attending. At a conference of this size, participants could find just about any kind of talk to suit their taste, including both sides of the false memory issues. Elizabeth Loftus received an award, and others who hold opposing views about FMS were also acknowledged. Professional conferences should encourage different perspectives, discussion and argument.

We mention this conference because of one particular session — the opening keynote address delivered by Gloria Steinem. A keynote address sets the tone, and it sets the direction for a conference. Ms. Steinem, an engaging speaker, is firmly aligned with those who hold to the strong belief in robust repression and multiple personality disorder. That, however, is not what most people think of when they think of Gloria Steinem. They think of a dynamic woman known for her work in the women's movement.

While a gratuitous attack was not the whole of her presentation, attacking the Foundation leadership seemed a strategy to advance a personal position and avoid the data that challenges that position. Ms. Steinem received an ovation, so it appears that the audience did not feel as we do that personal attack is a misuse of a professional conference.

No censure for Harvard professor of UFO sex

Seattle Post Intelligencer, August 4, 1995

After a year's investigation into professional and human subjects standards, Harvard has decided not to censure John Mack, M.D., leading proponent of space alien abduction therapy. Mack's lawyer said the investigation was not about medical malpractice.

Research Note

At the American Psychiatric Association meeting in Miami this spring, two studies were presented that indicated that severe, repeated sexual abuse in childhood underlies damage to brain structure involved in memory. This may predispose people to develop symptoms of dissociation or PTSD.

Douglas Bremner of Yale School of Medicine observed deficits in the hippocampal volume of 17 women who had suffered severe sexual abuse during childhood. Each woman's magnetic resonance imaging (MRI) data were compared to those of nonabused women of the same age and race.

Murray B. Stein of the University of California, San Diego took MRI scans of 20 women with histories of prolonged sexual abuse before age 15 and compared them to MRI scans of 18 nonabused women. Abuse victims displayed markedly smaller hippocampal volume.

An article about these studies appeared in *Science News* by Bruce Bower (Vol 147 p 340) entitled "Child Sex Abuse Leaves Mark on Brain" Many people have contacted the FMS Foundation to ask what this means. We, in turn, asked members of our Scientific Advisory Board for help. Our experts pointed out to us that the title is misleading; it is not appropriate to conclude from the data available that childhood sexual abuse "leaves a mark on the brain." In fact, changes in the size of the hippocampus are commonly seen in other psychiatric disorders, such as schizophrenia and manic depressive illness. Indeed, any psychiatric condition associated with stress can result in the secretion of substances in the brain which may damage the hippocampus.

Thus, to perform a methodologically correct test of whether childhood sexual abuse has any effect on the hippocampus, one would have to compare 1) a group of individuals who were victims of documented childhood sexual abuse and 2) a matched group of individuals who displayed the same history of psychopathology and present degree of psychiatric symptoms as the first group, but who had not been sexually abused. In addition, the two groups would have to be matched for such variables as age, alcohol use, and other demographic variables in addition to psychiatric symptomatology. Only then, with all confounding variables carefully matched, could one draw a conclusion about the purported effect of childhood sexual abuse on brain anatomy. Needless to say, a study using all of the methodological safeguards outlined above has never, to our knowledge, been performed - and until such studies are available, it is irresponsible to conclude that childhood sexual abuse "leaves a mark" on the brain.

(Bremner's article appears in the American Journal of Psychiatry, July)

Illinois State Medical Society Passes resolution about memory enhancement

On April 11, 1995, the Illinois State Medical Society, House of Delegates voted to approve a policy similar to the AMA policy on memory enhancement techniques, specifically, "That ISMS considers the technique of 'memory enhancement' in the area of childhood sexual abuse to be fraught with problems of misapplication."

Before Therapy

Dear Mom

This is just a little note to thank you for all the trouble and care you put into every event. It was so wonderful to have our family together at Thanksgiving. I guess I really appreciate it because I know what it's like when a family is broken. So much of what you do isn't mentioned and I just want you to know how special it is and how much I am grateful for it. Thanks for being you -

Much Love, "C"

After Therapy

Dear Mom,

You must have noticed that I have been distancing myself from you for the past months. This is not because of business or any other reason besides the fact that I have been struggling with some bad memories and they interfere with how I am able to relate to you now, and in fact always have, except I never had the courage to say anything about them...My childhood memories of you are of an angry person, one that didn't like me very much. I always felt that somehow you were jealous of me and that you disapproved of the attention that Dad gave me. I felt totally emotionally disconnected from you...

"C"

Request for Before and After Letters

I wonder if the FMSF would consider expanding on the "before therapy/after therapy" excerpts that appear at times in the newsletters. These letters to other parents have had a profound impact on me as I not only have the same "before and after" notes from my daughter but it appears that the parents in FMSF seem to have had especially close relationships with their children prior to therapy.

I expect that thousands of these "before and after" excerpts would have even more of an impact on the government, insurance companies, lawyers and society in general.

Mother from British Columbia

I am a researcher in New Zealand. Could you please ask families to send "before and after" therapy letters with permission for me to use them.

M.D. from New Zealand

If you have "before and after" letters that you are willing to share with researchers or with the FMSF Newsletter, send them along with a note giving permission for their use. Thank you.

FMSF really needs the clippings you send. Especially valuable for tracking this phenomenon are ads and articles from small local papers, or notices on church or supermarket bulletin boards. Please include "the source" or page number when you send them.

NEW BOOKS AND ARTICLES

Three articles appearing in the popular press this summer deserve special notice. Each one offers valuable insight into professionals and the practices involved in the FMS issues. Each, in a different way, helps to fill in the pieces of the puzzle: How could this have happened? Unfortunately, the articles are too long to reprint in the Newsletter, so we encourage readers to borrow them from the library or to order them from FMSF.

Devilish Diagnosis

Bonnie Gangelhoff

Houston Press, July 6-12, 1995

"Devilish Diagnosis" is a profile of psychologist Judith Peterson, Ph.D. The article is of special interest because Dr. Peterson is being sued by six former patients. The information in the article was obtained from the depositions of: Alison Roome, Amy Smith, Lynn Carl, Lucy Abney, Mary Shanley and Kathryn Schwiderski.

The article reviewed the professional background of Dr. Peterson who started her career working with the mentally retarded in Ohio. She then had a practice in NY state before moving to Houston in the early 1980s. She established a successful private practice in Houston. In 1987 she joined a local dissociative disorders study group in which participants discussed emotionally draining or difficult cases and helped each other. There was not much literature on the effects of trauma and abuse available at that time.

The author explains that, "During the mid-80s, according to one member of the study group, therapists across the nation had started hearing stories of satanic ritual abuse from patients. Similar stories were being told in Houston. Group members disagreed over whether the stories were real, with some believing the patients' memories were grounded in fact, and others contending that they were merely metaphors the patients had constructed to deal with some terrible trauma they had suffered."

Gangelhoff tells us that Peterson "was beginning to acquire a reputation as an expert on recovering memories of childhood abuse from her 1988 MPD diagnosis of Kathryn Schwiderski...It was around the time of her diagnosis of Schwiderski that Peterson — who had been certified in clinical hypnosis in 1988 — began regular phone consultations with Bennett Braun on MPD. In a deposition for the Schwiderski family's lawsuit, Peterson says part of her education in MPD came from Braun's recommended readings." According to the article, Peterson played an important role in the abuses that took place at Shadows Glen Hospital, which was closed after investigation by the state. Colleagues said that Peterson saw herself as a pioneer on a new frontier of psychology.

The Devil & Dr. Braun

Matt Keenan

New City, Chicago June 22-28, 1995

Five complaints from three sets of cases in the state of Texas serve as the source of information about Bennett Braun. In two of the cases, former MPD patients are suing Braun for malpractice. In the other three cases he is listed as a codefendant. There is another suit from a woman in Illinois and her two sons who were also hospitalized for an extensive length of time.

The author notes that "Braun played a key role in defining the modern approach to MPD. After seeing his first case of the disorder in 1974, he fostered a growing interest in the subject and went on to become a leading clinician in the field. In a 1992 interview, noted MPD authority Dr. Richard Kluft said, 'Every MPD patient in the country owes a personal debt of gratitude to Buddy [Braun]. He's the first ever to get a unit set up for these people, and all the other units around the country follow the train he has blazed.' Braun's efforts have also attracted the attention of some prominent feminists — in fact, Gloria Steinem thanks him in the credits to her book *Revolution From Within* and she delivered the keynote speech at a national conference on MPD held here [Chicago] last year."

A haunting observation from Dr. Philip M. Coons, a prominent Indianapolis-based authority on the condition of MPD, appeared in this article, "My guess is that one out of twenty people with MPD will commit suicide, and many, many more will attempt it at one time or another." Coons believes that MPD is far less rare than skeptics deem.

War of Remembrance

Democrat and Chronicle (Rochester, NY)

Part 1 of 5, June 11, 1995

Lee Krenis More

The author uses a workshop given by Charles Whitfield, M.D. as a focus for the first article in this series. Readers should not be misled by the fact that she reports negative things about the Foundation were included in his workshop. For example, she notes that Whitfield seems to have an enemy list and "Topping this enemies list is the False Memory Syndrome Foundation." Whitfield, she writes, describes FMSF as "a hoax being perpetrated on the world." He believes that nearly all of its members are guilty of sexual abuse, but they "but put up a big front."

She quotes him as saying about FMSF that they are "clinical Nazis, memory Nazis. ..They're not as extreme as the Nazis because they're not directly torturing and killing people... It's more indirect. They're much more subtle than the Nazis, and that can make them much more insidious to deal with."

Documenting statements such as those of Whitfield above is vitally important for the historical record. It is also important that the Foundation understand how some therapists view it in 1995. Krenis-More's articles are well-balanced. She penetrates to the heart of the issues and reports what people on both sides of the controversy have said.

To order: (Price includes mailing. Members have 10% discount.)

Devilish Diagnosis (permission requested) order # 110 [\$ 2.50]

Devil & Dr. Braun order # 115 [\$ 2.50]

War of Remembrance (5 part series) order # 120 [\$ 5.00]

"Bridey Murphy" is dead

San Francisco Examiner, August 18, 1995
from "Down to a Science" by Keay Davidson

A woman who "launched one of the oddest fads of the second half of the 20th century, a fad that anticipated, by four decades, the current hysteria about alien abductions, died this summer. Her death was noted in few newspapers.

In the 1950s, Virginia Tighe "Mae" Morrow, under hypnosis, came to believe that she was the reincarnation of Bridey Murphy, someone who had lived in early 19th century Ireland. She described the loves and adventures of her past life in a book called, "The Search for Bridey Murphy" which later became a movie. "Brideymania swept the country."

A reporter uncovered the truth. As a child, Ms. Morrow had been close to a neighbor whose maiden name was Bridey Murphy. This neighbor had apparently told her many stories about her life. "Under hypnosis, Ms. Morrow had unwittingly recalled long-forgotten memories of Bridey Murphy's tales about her native Ireland."

Davidson notes that "The Bridey Murphy case was an early and impressive example of 'false memory' syndrome: a situation in which a person sincerely recalls something that never happened."

FMSF SPEAKERS BUREAU and CONTINUING EDUCATION

The FMS Foundation SPEAKERS BUREAU is growing rapidly. Those listed include psychiatrists, psychologists, social workers, nurses, attorneys, law enforcement officials and writers.

The Foundation is currently developing programs suitable for professional conferences or meetings, professional development/staff training seminars, mental health programs/panels, and Continuing Education conferences and workshops, as well as less formal programs.

Programs can be arranged in many areas, including but not limited to memory, False Memory Syndrome, forensic, dissociative disorders (MPD), hypnosis, therapy issues, interviewing techniques, cults, satanic ritual abuse, retractors, mediation, reconciliation, civil & criminal law, professional malpractice, etc.

For more information about Continuing Education or to arrange a program call 215-387-8663 directly, or 800-568-8882 to leave a message.

Deep Denial

"Analysts put psychotherapy on the couch."
The Sunday Telegraph, (London) July 9, 1995
Jerome Burne

"The patient seems to be in a state of deep denial, refusing to acknowledge clear evidence both of serious abusive behaviour by his father and that some of his own behaviour has been inappropriate."

"This is not a preliminary diagnosis of a human patient. It is psychoanalysis, and its offspring, psychotherapy, that is under scrutiny. In the past few years the volume and vehemence of attacks has gathered

pace — the whole saga of recovered versus false memories of abuse, a stream of books and articles demonstrating that Freud fudged his results or was just plain wrong, claims that Jung was equally economical with the truth... And yet the profession seems unperturbed."

Coming this fall.

(1) "Memory for Evil" is the working title of an ABC Feature for Television that tells of the tragedy that befell the Ingram family in Washington state. The television script was written by T.S. Cook, based on the book "Remembering Satan" by Lawrence Wright. Ken Kaufman is the Executive Producer and Dick Lowry directed. Paul Ingram is played by John Shea and the part of Richard Ofshe is played by William Devane.

Library Displays Available

Displays for libraries or bookstores to help get the story out to the public about repressed memories are available through Upton Books. These are free to members of the Foundation and may be obtained by calling 800-232-7477. Ask for Eleanor Goldstein.

Our apology to those who may have worried about confidentiality when they received information about the library displays directly from Upton Books. The mailing was done under our supervision and our mailing list is not available to anyone.

Another Rumor

"Many believe that the FMSF is a front organization of the cryptocracy. Its purpose is to contain the flood of memories describing pedophiles in high places as multitudes of females in their late forties are suddenly remembering their abuse at the hand of the CIA and other government agencies."

(2) *Jeopardy in the Courtroom: A Scientific Analysis of Children's Testimony*, Stephen J. Ceci and Maggie Bruck
American Psychological Association, 1995. \$29.95
Item # 431-8350. APA Order Department, P.O. Box 2710
Hyattsville, MD 20784-0710, [phone 800-374-2721 or 202-336-5510] or fax 202-336-5502.

The primary focus is on children's testimony, interviewing techniques and suggestibility. Includes section on "The evidence for delayed recall of childhood sexual abuse" and "The role of suggestion in delayed recall of child sexual abuse."

(3) *The Memory Wars: Freud's Legacy in Dispute* will be published in November. It will contain the *New York Review of Books* articles by Frederick Crews and as much of the ensuing correspondence as the publishers were given permission to reprint. The articles were entitled, "Revenge of the Repressed, Part I & II (Nov 17, 1994 and Dec 1, 1994).

Non-Science and Real Science

August Piper Jr., M.D.

In a staff meeting four years ago, a fellow psychotherapist proposed treating a patient by "realigning his life-energy forces."

On hearing this, the fires of indignation roared up within me. I thought: how dare this therapist speak of such plans here? Doesn't she know we are meeting to discuss scientific treatments?

Perhaps the smoke billowing from the fires of indignation slowed the thought's movement from brain to tongue—I don't know. In any case, for whatever reason, just as I was about to make the above inquiries, the Voice of Humility posed two questions that turned the fires of indignation to embers. This voice whispered in my mind's ear: "Yo, Piper. What distinguishes your brand of 'scientific' psychotherapy from your colleague's 'unscientific' brand?" And just what, exactly, does 'scientific' mean, anyway?"

I thereupon closed my mouth (with as much dignity as the moment allowed) then began a search for answers to Humility's questions, a search preoccupying and troubling me ever since. Over the years, the questions evolved into larger concerns: What are the hallmarks of good science? How does one distinguish science from matters that are not science—say, matters of faith?

Worries about these questions become acutely painful for me in several settings. First, in writing books or papers: Is this writing based on anything sound? Does this paper say anything that needs saying? Second, in reading books like Peter Huber's *Galileo's Revenge: Junk Science in the Courtroom*—an unsettling but delightful book that should be on lots of must-read lists. Third, and most troubling, in testifying at trials where questions of psychiatric malpractice are raised. The expert witness in such trials requires some map, however torn, sun-bleached, or water-stained, of the border separating the land of science from the land of non-science.

These questions have also troubled no less a body than the United States Supreme Court, which has attempted to provide such a map. In drawing this map, the Court relied on four benchmarks that, among others, are hallmarks of good science. The following discussion is based largely on two thoughtful papers, cited below.

•First, is the technique or theory falsifiable? This question simply asks if a serious attempt, based on scientifically valid reasoning, has been made, or can be made, to prove that a given idea is false.

•Second, what is the technique's known or potential error rate? In other words, the Court wants the following questions answered: How prone to errors are the measurements used in examining this technique?

•Third, how widely has the theory or technique been exposed to rigorous and critical scrutiny by publication and dissemination in the scientific community?

•Finally, is the technique or theory generally accepted by the relevant body of scientists? Scientific theories or procedures become accepted because they have been published, scrutinized, and replicated, and thereby ultimately found trustworthy.

In summary, the Court's map concerns itself less with

what experts conclude than it does with how those experts reach their conclusions.

These criteria have come under some attack from critics. However, the Court has drawn a reasonably good map, one that will help delineate the border between science and not-science: say astrology, fortunetelling, or religion. Listing these three examples does not signify antipathy toward practitioners of, or believers in, astrology or religion—after all, I know that much psychotherapy sits uncomfortably near the border mentioned above. The issue is not that of an antipathy toward astrology or religion, but rather, of a concern that many have raised over the years: that wrapping unscientific beliefs in the cloaks of science, and then allowing courtroom testimony from those wearing such garb, risks shredding the fabric of the law:

Good science is defined not by credentials but by consensus. Whatever her resume may say, an expert who reports on views held by no one but herself, or on symptoms experienced by no one but one of her patients, is not reporting anything that can properly be called science. And the judge who welcomes her to court is allowing the pursuit of speculation and superstition to replace the pursuit of truth (*Galileo's Revenge*, p. 226).

Concerns about these risks are well-founded: recall the witchcraft horror that swept the world three centuries ago. However, in the last decade of the twentieth century, non-scientist judges and juries are demonstrating that they can distinguish between good science and junk science. They have learned that some psychiatric treatments are reasonable, and others are not.

A trial that ended last month in Minnesota demonstrated, with notable power, judges' and juries' abilities to distinguish between good and bad treatment. The psychiatrist in the case was sued for spending several years convincing the patient that the patient, years ago, had participated in, and repressed all memory of, the all-too-familiar litany of ghoulishness: dead babies, cannibalism, assorted mutilations, hooded figures dancing around campfires, multiple episodes of forced sex with her parents, etc., etc. No evidence at trial showed that any of it had really happened.

Two aspects of this trial are noteworthy. First, the judge concluded that recovered-memory therapy flunks the test of science; therefore, he reasoned, those wishing to testify about this kind of therapy fall into the category of the expert in the *Galileo's Revenge* quote above. The other aspect of this verdict deserving mention is that the damages assessed against the psychiatrist were five times greater than in any previous repressed-memory case.

Here are the two references mentioned above. 1) C.T. Hutchinson and D.S. Ashby, *Daubert v. Merrell Dow Pharmaceuticals, Inc.*: Redefining the bases for admissibility of expert scientific testimony. 15 *Cardozo Law Review*, 1875 (1994). 2) R.N. Jonakait. The meaning of *Daubert* and what that means for forensic science. 15 *Cardozo Law Review*, 2103 (1994).

* * *

I will close by looking both back and ahead. In looking back, the last column is found to contain an error. A refer-

ence was given there for a paper by Campbell on "tolling" the statute of limitations in sexual-abuse cases. Though the paper was cited as appearing in the American Journal of Forensic Psychology, it actually appears in the American Journal of Forensic Psychiatry (16:25-81, 1995).

Looking ahead: A response to the lengthy but kind comments by Thomas Griffin that just came the other day. Finally, once again, to those readers who write pleasant things: These comments invigorate writers: thank you, thank you!

Dr. Piper is in private practice in Seattle, Washington and is currently writing a book on Multiple Personality Disorder. He is a member of the FMSF Scientific and Professional Advisory Board.

Recent articles now available from FMSF

(members receive 10% discount)

FMSF order # 773 [\$ 4.00]
Olfson, M. & Pincus, H.A. (1994). Outpatient psychotherapy in the United States, I: Volume, costs, and user characteristics; II: Patterns of utilization. *American Journal of Psychiatry*, 151:1281-1288 and 1289-1294 (September, 1994). Report the data from a study of 40,000 people in 16,000 households in 1987. Of note, 3% of the people who received psychotherapy accounted for 14% of the nation's medical spending and younger and better educated people, women, and whites were more likely to use long-term therapy.

FMSF # 776 [\$ 4.50]
Poole, D.,
Psychotherapy & the Recovery of Memories of Childhood Sexual Abuse: U.S. & British. *Journal of Consulting & Clinical Psychology*. 1995, January. This important study documents the scope of risky therapy practices.

FMSF # 803 [\$20.00]
FMSF Amicus Curiae Brief - Rhode Island Supreme Court Certified Questions. The brief addresses questions certified to court concerning accrual of claims under discovery statute and alleged inability to recall related to the disability statute. It includes review of relevant scientific understanding and case law.

FMSF #837 [\$ 4.50]
Lemmerman v. Fealk, Williford v. Bieske Decision of the Michigan Supreme Court, Lansing Michigan, July 1995.
Important decision for repressed memory cases. See July Newsletter for description.

The Foundation has expanded and updated its Bibliography, which includes Collections of articles, Magazine/Newspaper Articles, Journal articles, and Legal material. Articles are in a variety of areas including Dissociative Disorders (MPD), Eating Disorders, False Memory Syndrome, Forensic, Hypnosis, Satanic Ritual Abuse, etc. If you would like to receive a copy of the Bibliography, please send us information in the form below and (if you live in the US) include a self addressed stamped envelope. There is no charge for FMSF members; non-members please include \$1.00.

____ Member - no charge, SASE enclosed

____ Non-member - \$1.00 & SASE enclosed

LEGAL CORNER

FMSF Staff

Jury Awards Patient Over \$2.6 Million In Case Alleging False Memory Implantation.

On July 31, 1995, a Minnesota District Court jury awarded more than \$2.6 million to a woman who had alleged that her psychiatrist had planted false memories of sexual abuse in her mind (Hamanne v. Humenansky, Minn. Dist. Ct., Ramsey Co., Judge Bertrand Poritsky, No. C4-94-203, 8/1/95).

Vynnette Hamanne filed the civil suit against Dr. Diane Bay Humenansky, a St. Paul psychiatrist, early in 1994 under the theories of medical malpractice, assault and battery, intentional infliction of emotional distress, negligent infliction of emotional distress, fraud, and interference with family relations. Only the medical malpractice claim went to trial.

Hamanne alleged that Humenansky had, during the more than five years of treatment, planted false memories of sexual abuse and satanic rituals, falsely diagnosed multiple personalities and subjected her to an increasingly coercive program of mind altering drugs, hypnosis and threats of abandonment, incarceration, and the loss of her child. The lawsuit also alleged that Humenansky did not advise Hamanne of the controversial nature of the treatment or alternatives to it. Humenansky also allegedly discussed cases among patients and crossed norms of professional/client boundaries.

According to Hamanne's complaint Humenansky told her that she "must have been" repeatedly sexually abused by her father, mother, uncle, grandfather, grandmother and possibly by other family members. She also allegedly told Hamanne that she had no memory of the abuse because she suffered from "repression and denial". Hamanne was also reportedly told that she would not get better unless she remembered and relived the abuse and confronted those who had abused her. Hamanne testified that she had been given the book, *Sybil*, to read by Humenansky and was told that "anything in it that startled me or offended me was likely something that happened to me that was a repressed memory." Hamanne alleged that the treatment had had terrible effects on herself and her immediate family when, in response to the false memories, they broke off relations with several other family members.

Humenansky defended her treatment methods and results. She denied purporting to be an expert or using hypnosis. Instead she testified she would simply direct patients to close their eyes and visualize a safe place. She also said she discontinued the truth serum treatment in 1990 at the request of other doctors. Defense attorneys had acknowledged that Humenansky made some errors, but argued that most of the problems suffered by the Hamannes were not caused by the doctor. They had asked the jury to award damages of about \$250,000.

Experts testifying for Hamanne regarding the lack of empirical evidence supporting the theory of repressed memory and the quality of care given her, included Elizabeth Loftus, Ph.D., Richard Ofshe, Ph.D., August Piper, M.D.,

Dr. Glenn Lewis, Jr., Dr. Keith A. Horton, Dr. William M. Grove, Dr. Marian Hall and Jeff Ford, LP. According to attorneys for Hamanne, once testimony regarding the reliability of repressed memory theory became cumulative, the court made a ruling that the theory of repressed memory lacked credibility and did not allow further expert testimony on it.

The jury found Humenansky negligent in her treatment of Hamanne and that her negligence was a direct cause of Hamanne's injuries. It awarded Hamanne more than \$2 million in past damages for loss of earnings, medical expenses and pain and suffering. Hamanne was also awarded \$461,000 for future loss of earnings, medical expenses and pain and suffering. Hamanne's husband was awarded \$210,000 for loss of consortium. While the jury found Hamanne's teen-age daughter had also been injured by the treatment, she was not awarded damages, as she had not been a patient of Humenansky. Philip G. Villaume, Humenansky's personal attorney, said that the decision would be appealed.

Humenansky is a defendant in at least five other civil lawsuits also alleging that she traumatized patients by making them recall false memories of childhood sexual abuse. The next is scheduled to go to trial October 9, 1995.

Plaintiffs were represented by Edward M. Glennon, R. Christopher Barden, and Christopher H. Yetka of Linquist & Vennum, Minneapolis. Defendant, through her malpractice insurance company, was represented by Debra Davy and David Waxman with the firm of Arnstein and Lehr of Chicago, Illinois. Defendant's personal attorney is Philip G. Villaume.

One of Hamanne's attorneys, R. Christopher Barden is quoted as saying that the effect of the verdict "is a stunning warning to therapists...and to insurance companies in that they had better start obeying the informed-consent laws and stop using experimental treatments like recovered-memory treatments on patients without their permission."

Federal Judge's Ruling Permits Parents to Sue Daughter's Therapists in 'False Memory' Lawsuit
(*Tuman v. Genesis Assocs.*, 1995 U.S. Dist. LEXIS 10149, Judge R. Padova, (July 20, 1995))

Kenneth E. Tuman and his wife, Joan E. Tuman, sued Genesis Associates and its principals, Patricia A. Mansmann, a licensed psychologist, and Patricia A. Neuhausel, a licensed social worker and certified addiction counselor, in Federal District Court in Pennsylvania. The plaintiffs alleged that these mental health therapists, while treating their daughter, Diane, for bulimia, implanted false memories that they (1) were members of a satanic cult; (2) murdered Diane's twin brother and other children during satanic rituals; (3) raped and impregnated Diane and then subsequently murdered her child during a satanic ritual; and (4) convinced their daughter she was in danger from cult members who intended to harm her for wanting to leave the cult. Additionally, they complained that their daughter suffered a catatonic seizure during a "rage therapy" session and was

left unattended for more than 8 hours before defendants sought appropriate medical care.

The Tumans alleged further that the defendants used group therapy sessions to state that Diane was the victim of incest and ritual satanic abuse and urged her to identify her abusers. With this encouragement, Diane falsely accused her parents of incest, murder and satanic cult involvement.

The suit filed on behalf of the Tumans contained counts for breach of contract, negligence, interference with filial relations, intentional infliction of emotional distress, defamation, intentional misrepresentation and punitive damages. The defendants responded with a motion to dismiss all counts. This litigation, like many cases that we review, was before the court as a preliminary matter; there had been no trial of the issues.

On July 20, 1995, Judge John R. Padova issued an opinion and order denying in part and granting in part the defendants' motion. The court permitted the Tumans to proceed on all counts except the one for interference with filial relations; that was denied with prejudice (meaning it can not be amended or litigated further) since such a cause of action is not allowable under Pennsylvania law. Although the court also dismissed the negligence count, it allowed the plaintiffs to amend. All the remaining causes were permitted as pled.

Judge Padova's decision contained some interesting and helpful language that impacts the issues which continue to confront many. First, in allowing the breach of contract action, he distinguished it clearly from negligence. He held that because the Tumans engaged the therapists to perform a specific task, in this instance the treatment for bulimia, the defendants breached more than the standard duty of care. Indeed, a complaint seeking to support a breach of contract action under these circumstances must set out this precise factual averment.

In disposing of the negligence count, the court had no alternative but to grant the defendants' motion since the plaintiffs alleged only emotional injuries and not, as Pennsylvania and most other jurisdictions mandate, physical injury which resulted from the defendants negligent conduct. Nonetheless, he gave them the opportunity to amend and cure the defect if the facts governing their situation make it possible.

The judges' discussion of the negligence count also encompassed the question of what duty the defendants had to the plaintiffs even though they were not patients. He predicted that the Pennsylvania Supreme Court would conclude that a specific undertaking coupled with reasonably foreseeable harm to an identifiable third party is sufficient to maintain a claim for professional negligence. He emphasized in his opinion that his narrow holding requiring both of these elements does not present a problem of the unbounded tort liability that the majority of the courts fear.

The court's decision paves the way for the Tumans to proceed to trial against the therapists. Its ruling now puts them in the position of putting on evidence to prove their case and establish damages. We will continue to monitor the status of the case as it progresses through the courts and will, of course, report the outcome.

FMS Foundation files amicus curiae brief before the Rhode Island Supreme Court

The FMSF Legal Research Project has recently completed an amicus curiae brief to be submitted to the Rhode Island Supreme Court.

An Amicus Curiae¹, which literally means, "friend of the court", is a group or person that interposes in a judicial proceeding, with permission of the court, for the purpose of providing the court information on matters of law or public interest. The amicus curiae is not a party to litigation, but participates by making suggestions and ensuring complete presentation of fact and issues. Unlike the parties, amici cannot control the direction or management of the case, they cannot offer evidence regarding specific allegations, examine witnesses or cross-examine them, and they cannot be heard without special leave of the court. They do, however, have a direct interest in the outcome of the suit and a desire to protect unrepresented persons or the public interest, or to point out error to the court. As such, briefs prepared by an amicus curiae are submitted before higher state courts or federal courts.

The Rhode Island Supreme Court is considering four critical questions culled from over twenty-one repressed memory cases involving numerous complainants and defendants which had been filed in Superior Court. The adult Plaintiffs allege that as children growing up in Rhode Island, they had been sexually molested by priests. They are seeking millions of dollars from the church. Since the questions were referred to the Rhode Island Supreme Court, hundreds of pages of legal briefs have been filed. Oral arguments are expected this fall.

The FMSF, after requesting the court's permission to file this brief as an interested party, addressed two of the four questions before the court regarding interpretation of two Rhode Island statutes: RI 9-1-14(b) (the so-called discovery rule for childhood sexual abuse) and RI 9-1-19 (a statute granting exception to the state statute of limitations for disability).

In its brief, the FMSF urged the court to consider equitable and evidentiary elements essential to statutes of limitations in light of current knowledge regarding repressed memory and the suggestibility of memory. Problems inherent in repressed memory claims, it was argued, challenged premises on which courts have historically rested when applying the discovery rule. The brief provided the court with empirical findings and legal authority regarding 1) the presumption that independent verifiable evidence of the alleged wrongdoing exists, 2) the assumption that the injury may reasonably be linked to the alleged wrongdoing, and 3) the assumption that the repressed memory testimony itself is reliable. In addition, the FMSF submitted to the court for consideration, the responses of recent decisions to the problem of applying discovery where the basis of the claim is of unknown reliability and uncertain verifiability.

1. In Canada amici are referred to as "non-party intervenors." The European Convention on Human Rights is expected to add a new article (No. 36) which will allow "third-party intervention."

British Columbia Court of Appeal Orders New Trial

Vancouver Sun, July 12, 1995

Larry Still

A lawyer who had been found guilty of sexually assaulting a now 35-year old woman when she was between 8 and 11 years old, has been granted a new trial. The woman had recovered her memories under hypnosis. "There is a hard-edged debate in the scientific world about recovered memory of early sexual abuse," said the three Appeal Court judges in a decision handed down on July 10, 1995. "The trial judge accepted only some of the allegations while rejecting others...The memories recovered at the early state could be accepted but not those at the later stages, where memories may have been contaminated by the suggestions of well-meaning but over-zealous therapists and counsellors," the appeal judges said. In overturning the trial court decision the judges noted that, "The plaintiff did not move from sound to questionable therapies; they were unsound from the beginning of the retrieval process."

Federal Jury Awards \$850,000 in damages to family in therapist's malpractice case.

by John Ripley

Bangor Daily News, 7/10/95, 7/11/95, 7/12/95, 7/22/95

A federal jury awarded Peter Murray and his family \$850,000 in damages for injuries suffered when therapist Judith Osting said the father had sexually abused his young daughters. The father was awarded \$400,000 for compensatory damages, his wife \$50,000 for loss of consortium and each of the two daughters awarded \$200,000.

Murray's ex-wife, Barbara, took their young daughters to Osting to treat problem behaviors which began at the time of a bitter divorce. Osting said that those behaviors were signs of sexual abuse. Two years later, independent evaluations concluded that there was no evidence of abuse. At that time Murray sued Osting in U.S. District Court for malpractice and slander. Barbara Murray has initiated a similar, but separate legal claim which is still pending.

Appeals Court Overturns Child-molestation conviction

Fresno Bee, August 10, 1995

Robert Rodriguez

Donna Sue Hubbard was convicted of child molestation in 1985 and given a 100-year sentence. The 5th District Court of Appeal overturned the conviction which was one of the famous Kern County cases during the mid 1980s. "The climate at the time was one of mass hysteria," said Glenn Cole, former Kern County grand jury foreman.

"There is substantial likelihood that the children's resulting testimony was false and thus unreliable," appellate Justice Thomas Harris wrote. The court also faulted the trial judge for faulty instructions to the jury. The decision will result in a new trial if prosecutors choose to retry the case.

According to the article the "allegations began 10 years ago when police investigated the possible molestation of a 6-year-old boy by one of Hubbard's neighbors. As investigations continued, the allegations became increasingly detailed and horrific. The neighbor was accused of "tying him up — placing him on a wall hanger with either a rope, harness or chain — and molesting him." Investigators found only a small cup hood with a shank three-eighths of an inch long in the apartment.

Hubbard became involved after a neighbor said that Hubbard's son was also at the neighbor's house. She became a suspect after a paid informant "accused her of receiving money for allowing others to molest her son."

Judges Reject Ingram's Guilty Plea Withdrawal

The Olympian, July 6, 1995

Brad Shannon

The 9th Circuit Court of Appeals in San Francisco rejected Paul Ingram's bid to withdraw his guilty plea on June 26, 1995. This decision is the fifth time since 1989 that a court has rejected a similar plea from Mr. Ingram.

Paul Ingram, a former top civil deputy in the Thurston County Sheriff's Office, Washington, is now serving a 20-year prison term. He claims he was coerced by his psychologist and pastor to admitting to rapes of his children which had satanic and ritualistic overtones. California sociologist Richard Ofshe reported on what he believed to be Ingram's willingness to develop his recollections to match investigators' questions. In their case memorandum, however, the Appeals Court judges wrote, "mere advice or strong urging by third parties to plead guilty...does not constitute undue coercion."

Souza Convictions Upheld by the Massachusetts Appeals Court

The convictions of Raymond and Shirley Souza for sexually molesting two of their grandchildren were upheld by a Massachusetts Appeals Court (Commonwealth v. Souza, Middlesex, MA, No. 93-P-1494, August 17, 1995). The Souzas had been sentenced to nine to fifteen years in 1991 and are currently under house arrest.

In their appeal, the Souzas' primary argument was that the grandchildren's accusations were the product of family hysteria, and parental suggestion. The Souza appeal was based on the fact that the trial judge had excluded cross-examinations of the grandchildren's mothers who reportedly had recovered previously unknown repressed memories of sexual abuse. Defense counsel at trial had also wanted to question the daughter's therapists about their patients evolving convictions that they had been sexually abused when they were children. The trial court had allowed some questioning of the mothers about their conversations about sexual touchings with the complaining grandchildren. It is also claimed that trial court's denial of motions to separately try the claims of each grandchild produced an unfairly compounding effect and deprived the Souzas of the right to relevant cross-examination and the right to confront the witnesses against them. Several other claims of error were also made.

On each point the Appeals Court affirmed the judgments of the conviction, holding that trial judge's rulings on these points were within discretion as to determining relevancy of the areas where cross examination was to be allowed. The Appeals Court wrote that the number of accusers, the characteristics of the accusations and the results of medical examinations of the grandchildren was not misrepresented. The Appeals Court found that despite the "inconsistencies in the government's evidence, the fanciful character of some of the children's claims, the evidence of an open and loving home, parental pressure...the finder of fact [could] rationally conclude that the offense charged had been proved beyond a reasonable doubt" and so found no reversible error. Thus the convictions were allowed to stand even though the trial court had acknowledged that some of the allegations of the children could not be believed. Other appeals are pending.

Crimes of the mind

The Herald, Everett, WA

June 25, 1995

A 23-year-old Post Falls woman charged with fraudulently obtaining prescription drugs contends that one of her 3,817 personalities is actually the responsible party. Nicole Chastain said she was diagnosed with multiple personalities at 16, after being abused by her mother and father.

Woman's personalities testify on psychiatrist's alleged abuse

Dallas Morning News, August 20, 1995

Margaret Zack

In a Minneapolis area trial, four-year-old Elizabeth and 10-year-old Ann have both testified that they were sexually abused by a psychiatrist William Routt, M.D.

The unusual aspect of this case is that Elizabeth and Ann are some of the personalities of one person, Ms. Slavik, who was a patient of Dr. Routt for 18 months. Ms. Slavik, now 38 years old, has been diagnosed with multiple personality disorder with at least 24 personalities, some of whom she hasn't heard from in 10 years. Ms. Slavik's lawsuit has been combined with another abuse lawsuit against Dr. Routt, both of which came after his death in June, 1991.

An expert testifying for Ms. Slavik said MPD is a way for a child who has no coping mechanisms to deal with difficult circumstances. A personality is created to deal with the bad things. Dr. Alan Schefflin, a hypnosis expert from California, said in an affidavit that a suggestion that MPD patients have difficulty telling fact from illusion contradicts his review of scientific literature. "This viewpoint is, quite frankly, not an opinion of science; it is an expression of a bias against a class of the mentally ill," he said.

(Editors's note: We have been asked if anyone has ever litigated whether it is necessary to give Miranda warnings to each of the personalities. We can't help but wonder. Perhaps a reader has an answer.)

BOOK REVIEW

Putting the "Auto" in Biographical Memories

Allen Feld, Reviewer

White Gloves: How We Create Ourselves Through Memory
Free Press, 1995, 268 pages, \$22.

John Kotre has written a book that synthesizes psychological and neurological research, personal case histories and aspects of his own life into a statement about autobiographical memories. Put quite simply, the book is intended to explain how we are continually rewriting our memories. While this thesis is not new, the force of this extremely well-written book may be in Kotre's acceptance of diverse beliefs which are vigorously debated in the false memory/recovered memory therapy controversy. This may be a reason that *White Gloves: How We Create Ourselves Through Memory* may appeal to a disparate range of readers. However, this book seems stronger in dealing with the science of memory than with the art of therapy.

Kotre, a professor of psychology at the University of Michigan, Dearborn, is able to describe in every-day language some very complex biological aspects of the brain's function in creating and storing memories. He uses a developmental model from birth through maturation to describe the evolution of a person's memory. After discussing infantile amnesia, he describes the maturation of the brain in its capacity to create autobiographical memories. Significantly, his developmental model doesn't stop there. He relates how the brain and memory develop through adulthood into the aging stages, and he discusses what he labels as family memories—the collective stories (or myths) that often shape an individual's psychological growth. Kotre's description of memory functioning as the keeper of the archives and maker of myths is an essential element of this book. Through describing these dual functions, He reinforces a key thesis: we are continually changing our autobiographical memories through redefining the meaning of events and through the normative reconstruction of memories as they are recalled. His explanations are bolstered by integrating findings from cognitive and experimental psychology with the physical sciences, which results in an appealing scientific foundation for much of his work. Readers who dislike scientific readings may find that this book uses those kinds of readings sparingly, and they are described and interpreted by Kotre in non-technical language.

Another strength and uniqueness of *White Gloves* is Dr. Kotre's extensive use of cases. He first offers some personal insights into his own evolving autobiographical memory. The title relates to a discovery he made in his mid-forties about his grandfather, who died before he was born, and the grandfather's love of music. Readers will readily recognize the importance of that vignette as the author uses the gloves and taped interviews with his father to create memories of the grandfather he never knew.

However, Kotre does not just rely on his own life to continually emphasize the point that one has substantial control over both the memory and its meaning. During his professional life-long study of autobiographical memories, he has interviewed many people and he has also extensively

studied the works of others who engage in similar collections of personal stories. He uses these anecdotal accounts to further explain how memory may operate, delving into ideas such as: memories deteriorate over time; the conditions that may effect which memories are moved from short-term to long-term memory; why it is so common to believe you had an experience when you were only told about it; and photographic memory. In a non-offensive manner, he dismisses past-life memories and such unusual notions as memories recovered from the fallopian tube or womb.

What is disconcerting about *White Gloves* are Kotre's definitive statements on some highly controversial subjects. He makes some important assertions in a matter-of-fact manner and without documenting them or citing his sources for these conclusions. In fact, he eschews standard scientific referencing and it is often difficult to ascertain what he is referencing. Included among these questionable and unsubstantiated statements: MPD (DID) is caused by sexual abuse; situations are known in which repressed memories of abuse have been corroborated by the abuser; repression and phantom memories both occur; in therapy, one can learn enough about a situation to make a clinical judgment about the accuracy of incest memories recovered in therapy. Interestingly, he also writes that clinical conclusions such as these should not be used in court.

At times, some significant oversimplifications are also made. In a brief discussion of narrative and historical truth, Kotre takes a common therapeutic position that "... narrative truth is sufficient for clients to get better." (p. 57). This position is consistent with his book and his beliefs, but is too complex an issue to be included in this perfunctory manner. He does something similar with MPD. He posits the theory that perhaps children lack the brain development to have MPD, but in adolescence the brain has matured to a degree where that is feasible. He then offers the possibility that MPD may be a cultural artifact, perhaps resulting even from reading a book such as *Sybil*. His statement: "It's more likely that traumatized children have not yet been exposed to MPD Models in the media and have not yet learned this way of channeling dissociation." (p.153) seems to approach that important and highly contentious claim in the fashion similar to that used with narrative and historical truth, and states that it matters little if it is an artifact.

Kotre's failure to address the controversy surrounding MPD is disquieting. While one hopes that no clinician's practice would be unduly persuaded by one text, no matter how well-written and authoritative it may appear, it is difficult to ignore the possibility that some therapists may use his writings to continue or initiate a pattern of work which may create iatrogenic outcomes. It would have been prudent to mention that these clients might display a propensity for suggestibility or might have what has been identified as a source deficit. Source deficit may account for a confabulation of a memory where one recalls an event, but includes pieces of information from another memory, such as reading *Sybil*, and including some of that book in one's own autobiographical memories.

While there is a great deal to commend in *White Gloves*, there is also much about which a reader should be cautious. Matters of the past have differing impacts on peo-

ple. The key message in this book, that we are continually creating and recreating ourselves through our memories, should not be ignored. However, decoupling that message from the essential importance of the accuracy of certain autobiographical memories can be a recipe for unnecessary pain.

Allen Feld is a licensed social worker and Associate Professor at the School of Social Work, Marywood College, Scranton, PA. He is also active with the FMSF in continuing education.

BOOK REVIEW

Reviewer, John Hochman, M.D.

Rewriting the Soul: Multiple Personality and the Sciences of Memory, by Ian Hacking; Princeton U. Press, 1995; \$24.95, 336 pages

Hacking has written a scholarly tome with the goal of bolstering a particular philosophical theory of his although readers might have anticipated something more critical based on his past articles. Hacking believes that the participants in the current "debate" about the nature of memory are (without knowing it) struggling to redefine the soul in the language of science. This may come as a surprise to the likes of Elizabeth Loftus and Lenore Terr, but after all, they are not philosophers and are bound to miss the big picture.

By the way, what is the soul anyway? Professor Hacking explains:

Philosophers of my stripe speak of the soul not to suggest something chemical, but to invoke character, reflective choice, self-understanding, values that include honesty to others and oneself, and several types of freedom and responsibility. Love, passion, envy, tedium, regret and quiet contentment are the stuff of the soul.

Seem a little fuzzy? It gets more so.

I do not think of the soul as unitary, as an essence, as one single thing, or even as a thing at all. It does not denote an unchanging core of personal identity. One person, one soul, may have many facets and speak with many tongues.

Hacking takes his definition and runs with it, producing a concoction of facts and fuzz. He believes that multiple personality disorder exists, at least *I think* he does. He seems to be more interested in the creation and interplay of ideas as opposed to whether ideas are grounded in reality (or whether they have destructive consequences). I find his approach to be that or like that of the Greek scientists who were so busy thinking about science that they never bothered to do experiments, or of Karl Marx's writing *Das Kapital* by sitting in the library of the British Museum. Hacking makes only fleeting reference to an interview he had with a person who believed she had MPD and the subject was confined to talking about her role as a facilitator of networking among other people who believed they had MPD.

The book is a treasure trove of historical anecdotes and observations about certain 19th century psychiatrists whose

ideas impacted on contemporary MPD concepts, and also the contemporary MPD movement and its icons. This is the book's only redeeming quality, but it is a substantial one. And yes, it does have an aesthetically superior cover, centered around a haunting painting that someone found in a Munich museum.

The author fancies himself an unbiased observer, assuming that all current proponents of all views on MPD and memory will somehow take some offense from his observations. He does indeed do a lot of intellectual nose-tweaking, however his bias shines through. Just about all proponents of the false memory syndrome concept are eventually targets for his darts, while Judith Herman, Ralph Allison, and some others are put in a pantheon of courageous pioneers.

He occasionally seems to emerge from his fuzzball protective coat and takes a stand. He sees child abuse as being an unmitigated evil. However such moments of seeming clarity offer little comfort, since he doesn't share his definition of evil with us.

John Hochman, M.D. is a psychiatrist in private practice in Los Angeles. He is a member of the Scientific Advisory Board of the FMS Foundation.

Dear Dr. Frank,

I don't want to do harm. How can I know if a repressed and recovered memory is valid?

—Conscientious Therapist

Dear Connie,

You can't.

Frank Pittman, M.D.

Psychology Today, Vol. 28, No. 4,
July/August, 1995

An Article of Interest

FMSF order # 773

[\$ 4.00]

Olfson, M. & Pincus, H.A. (1994). Outpatient psychotherapy in the United States, I: Volume, costs, and user characteristics; II: Patterns of utilization. *American Journal of Psychiatry*, 151:1281-1288 and 1289-1294 (September, 1994). A summary of these important articles appeared in the June 1995 issue of the *Harvard Mental Health Letter*. The articles report the data from a study of 40,000 people in 16,000 households in 1987. Three percent of the population (80 million visits) had seen a professional for psychotherapy at least once that year. 32% went to psychologists, 24% to psychiatrists, and 25% to others. Psychotherapy accounted for 8% of all outpatient medical expenditures. The 3% of the people who received psychotherapy accounted for 14% of the nation's medical spending. Psychotherapy may reduce other medical expenses, however. Younger and better educated people, women, and whites were more likely to use long-term therapy.

MAKE A DIFFERENCE

This is a column that will let you know what people are doing to counteract the harm done by FMS. Remember that three years ago, FMSF didn't exist. A group of 50 or so people found each other and today we are over 17,000. Together we have made a difference. How did this happen?

California - Our local South San Francisco Bay now has 10 families with children who are in the process of returning and resuming normal relationships. These are not retractors. One of the returning daughters asked her mom if she could come to our meeting in April. When she arrived I told her she was our "extra-special guest." After hearing the first parent speak, our extra special guest asked if she could speak. Both her mom and dad were present. First she stated that she didn't know what to expect when she arrived at our meeting. She was surprised to find that not only was she greeted as a welcome guest but more than that she was an extra special guest. She then described how she had been diagnosed as having MPD and had agreed to short-term institutional care in Philadelphia which became four months. She said that she was highly drugged and that she wanted to leave but was not allowed to.

When she returned home to her husband and children, they expected her to immediately resume normal activities. She was unable to do this and her husband filed for divorce. The husband has the children and she is not allowed to see them. Her advice to the parents was to take their daughters back unconditionally and forget about discussing "The Big Issue (TBI) for now. "Memories are part of the damage.. and can be dealt with later," she said.

Parents asked her a lot of questions which she answered directly. She was asked what brought her back to her parents: Her answer was that she had nowhere else to go. She was shocked when she heard "yes" because her therapist had told her she could never go back home. Two sisters had stayed in touch with this person.

Later on in the meeting during another person's talk, our extra special guest broke into tears. The speaker stopped and our extra special guest explained that she had come expecting to see parents full of guilt. All she was hearing were expressions of love, trust in God, kindness, etc... She asked, "Why can't you film what is happening here today so others can see what is happening and what you are all like: We (other survivors) all that since you were members of FMSF that you would be totally different from this. Why can't others just see what's happening here?"

My challenge to readers - how can we show the world what we are like? How can we make the difference that will help our children?

Florida - **LIBRARY DISPLAYS** are now available through SIRS Publishers. Call 1-800-568-8882. This is an attractive and positive way to inform people about the many new books that are now available about false memories and the devastating effects this is having on families.

Illinois - Correction - Last month you wrote about my efforts to have a Orlando Village sponsored hypnosis class canceled because of the danger that can come from poorly trained hypnotherapists. The *Chicago Tribune* article of July 4 from which you took a quote from me was in error. The correct quote should be "only eighteen (18) hours of training is required from the Hypnodyne Foundation in Clearwater, FL to be licensed as a Certified Clinical Hypnotherapist." As an update, the battle continues. Although the course in question will be run, there seems to be growing support against future programs.

Indiana - I have been writing to psychology departments at colleges, universities and religious institutions in my area. I send them general information about the problem of FMS and tell them that I would be willing to come and speak to a class and tell my story. Already, I have been invited to speak to two classes this fall. My daughter is a retractor. She recently went to a local hospital, asked to meet with the

director and told him her story. She is waiting to see if he will invite her to speak to other staff members. Even though our family is back together, we want to make a

The only thing necessary for the triumph of evil is for good men to do nothing.

Edmund Burke

difference for others.

Missouri - Persistence and letters can have an effect. You never know what you can accomplish if you don't try. I wrote to my local television station to complain about a broadcast by John Bradshaw that was negative about parents. I sent copies of articles about FMS and compared Bradshaw's negative program with the Frontline program. On July 10, I received a letter from the station saying "we have come to the conclusion that we will not rebroadcast this program, or broadcast any other program by John Bradshaw." You never know what you can accomplish if you don't try!

Pennsylvania - Several months ago I wrote to tell you about the fact that my son had been required to memorize Sue Blume's check list of signs of sexual abuse in his health class. My family has not been affected by FMS, but I am concerned about science. Your readers might be interested to know that after I went to the school to express my dissatisfaction with this approach, the Director of the Health program called FMSF and asked for information. They have informed me that they are working on changing the curriculum. I will write again after school starts and let you know what happened.

Wisconsin - I gave a speech to teachers getting their continuing education credits. Two people came up to me after and said, yes, it has happened to their family. I used the library display material and all the new books that have been published about FMS as a focus of my presentation and I told my own story.

You can make a difference. Please send me any ideas that you have had that were or might be successful so that we can tell others. Write to Katie Spanuella c/o FMSF.

FROM OUR READERS

It's Time to Stop FSM: A Retractor's Story

Dear FMSF,

A while ago I got information from you for an essay I was doing on false memories in relation to my experience. I promised then that I would send you a copy of my essay when I was done. I got a 100% on it from a professor who rarely gives above an 85%. Here it is. I have no problem with my paper being used in the newsletter as I would love to help others.

Clare

(Editors note: Because of space limitations, we condensed Clare's essay to include only her personal account.)

I was first told about False Memory Syndrome (FMS) a little over a year ago by a friend who was concerned about what was happening to me. I firmly told her that no therapist had ever hypnotized me or placed any memories in my head, and that the FMS Foundation was just a group of perpetrators who were trying to stop victims from breaking the silence. My opinions have changed drastically since then. Since November I have tried desperately to find answers to my false memories. Some of what I have learned about my own past, and false memories in general has surprised and greatly disturbed me.

For me it started when I returned to therapy after breaking up with a boyfriend. I had been terrified of him, or of being anywhere alone with him, but couldn't explain why. I was too far into therapy when I found myself leaning towards sexual abuse. The feelings were so vivid, and real. I couldn't deny what I was remembering. My therapist was excellent, and never pushed anything on me. Most of the time she helped me question it all, saying that there ARE other answers, but no matter how hard we looked, it kept coming back to incest. My memories of incest were just too believable.

I have analyzed these months of therapy over and over again since last fall. First of all, when I entered therapy I showed all the signs of being an incest victim, and I knew it. (I had read books about it.) I have since learned that sexual abuse is not strongly correlated with the symptoms that are associated with it. Also I, like many other people, held the theory that memory operated much like a videotape recorder, and that everything retrieved was accurate. These theories are now being challenged, and people are beginning to realize, as I am, that memories are not always correct. I have also learned that new information can be confused with old memories. I now know that what I thought was incest was based on another incident altogether.

I left therapy when I moved to a new town. I thought I was doing well and felt that I had dealt with most of the issues of abuse. I decided to seek a therapist in this new town just to make sure I would not have problems while in school. I denied that anything had ever happened to me but my psychiatrist suggested hypnosis to find out the truth.

I think this is where I made my mistake. Almost everything I read about FMS discusses how hypnosis or relaxation is used with gentle but direct questions which may lead to false memories. As Roseanne Arnold said on the Oprah Winfrey show, "When someone asks you, 'Were you sexually abused as a child?' there are really only two answers: One of them is 'Yes,' and one of them is 'I don't know.' You can't say 'No.'" This is how I remember feeling during my hypnosis. I remember being asked a number of times, "Is there anything else you remember?" and later, "What is your name?" These two questions led to beliefs that would destroy the next year and a half of my life. After being asked the first question enough times, I began describing a dark room with people dressed in black robes holding candles. The second question led to answers of names other than 'Clare'. On my last session I asked that these issues not be discussed again, and was assured they would not be brought up under hypnosis. They were, and I was so confused that I stopped therapy completely. Unfortunately, the seed had been sown.

Although I tried to forget the incident, I could not. Four months later, while at a friend's cottage, I drew a picture of a young child in a circle of people dressed in black robes. The child looked terrified. A friend saw the drawing and told me she knew someone else who had been ritually abused. She told me her friend had Multiple Personality Disorder (MPD) and before I knew what was happening I was telling her about my alters (the names that I had not forgotten from hypnosis).

Over the summer of 1993 I spent most of my time with this friend. She argued in my defense when people told her I was making it all up, and she told me I was in denial when I tried to tell her it wasn't true. In mid-July, I left home, leaving only a note telling my parents I could not see them any more. I gave no explanation, and no forwarding address. I had fallen into the last stage of my transformation. I was a full fledged survivor now, and I believed it all.

I found a new therapist who dealt with MPD and ritual abuse. In October I spent two weeks in a Psychiatric Hospital because of memories to do with Halloween. I dropped to part-time at school and continued finding more and more horrific memories from my childhood. Just before exams I attempted suicide for the first time. The letter I left said that I was tired of being a burden on my roommates and that I couldn't go on with it anymore. Looking back, I remember having a strange feeling that it was all a lie, but I was in too deep to tell anyone.

When I look back on it now, I think it was easier for me to be a survivor than someone who just went to school or work and lived a boring life. It was easier to dump all my upsets, confusions and mistakes on someone else. I got caught up in the memories and beliefs and didn't know how to get out and in many ways didn't want to get out.

In the spring of 1994, I began to become aware of what was happening to me. It was too late to save the year. I lost almost all my credits in school. I decided to switch programs. I tried to straighten out my life and I made contact with my family again. I went to summer school and got

nineties in my courses. I never told anyone my memories had been false.

In September it became very difficult to keep the lie going. Through tears I finally admitted to one friend that I. While in the hospital I wrote letters to friends telling them the truth and how sorry I was. Most friends stopped talking to me, either too hurt by what I had done, or just wanting me to hurt as much as they did. I was forced to move, find a place on my own and once again drop courses I was failing.

I am not the only one that has had these problems. The FMS newsletter published many letters of 'retractors' and 'returners' who are equally upset by what has happened to them.

It's been five months since I admitted to friends that my memories were false. For the first time I read stories of people who believed their memories enough to hurt everyone around them, and now they are trying to recover from their mistakes. How many of us have to go through this hell before someone finds the answers?

When I first entered the field of psychology I wanted to study MPD. I wanted people to understand how real it is. Now I want to study FMS. I want to help find the balance between believing everyone and believing no one. People do not deserve to go through what I have gone through. It's time to stop the False Memory Syndrome.

A Thank You

This past weekend I was enjoying the company of my daughter and my two beautiful grandchildren, a pleasure that was denied to me for over a year. I told my daughter that it would be hard for me to bear malice against her therapist because I was so happy since her retraction. I wondered if I would make a convincing courtroom witness in light of my forgiving attitude. Then the FMS Foundation Newsletter came in the mail and I sat down to browse. By the time I read the first page I was in a state of agitation and frustration that made me understand that nothing will ever erase the gut-wrenching pain and anxiety I experienced when I stood accused of a crime worse (to me) than murder. I recalled the abuse hurled at me by my daughter's therapist before I knew what the problem was. I remembered the police coming to my home to arrest me for violating a restraining order that was never served. I recall gathering bits of information from friends and family concerning the welfare of my child and grandchild. A patient of mine, who works in our delivery room, told me I had a new grandson, offered to sneak me into the nursery for a look at him. I didn't go for fear of imprisonment.

My daughter has been back for over a year, my grandchildren are an everyday part of my life now; still I sit here and write this with tears in my eyes recalling all the negative emotions and uncertainties of that experience.

I thank you for all you are doing and have done and I am grateful to the Newsletter for not letting me forget.

A Dad

My daughter and I finally had our long walk together on the beach yesterday. It took eight years to fulfill our promise to have that walk and talk. We held hands and shared good memories and wept and hugged as the sun set witnessed our reunion.

How will I ever be able to thank my wife, the families and the Foundation for helping me to build that bridge?

You can add my daughter's name to your retractor files. My daughter wrote the enclosed piece, "In My Father's House."

A Dad

In My Father's House

In my Father's house. Noise of unsaid words haunt walls of pain.

In my Father's house, I see my childhood in his sharp blue eyes. The ocean sounds alive as it slaps time in my face. Wrinkles tell the truth.

In my Father's house there is a space for peace and nowhere to put judgment. An old violin hangs to remind life of how out of tune we have become. Here in my Father's house, generations meet in between truth and fantasy to find a bridge.

In my Father's house, mute voices in the wind, blow and snap the weathered front gate.

It is late. Time taken in between the waves of resentment, grown out of fear, is replaced with the Ocean. Blue eyes in the salt of the sea, watch and wait.

It is late. There is no time for anger now, only for today's forgiveness. We show and tell life.

In my Father's house, God creates a new family. My father's house is inside a God of forgiveness.

I have lost years of my life thinking and lost in my head. My whole truth is now shattered. What really happened to me? Was I told my truth on drugs, or did I create my own reality?

When I was a little girl, I was a little girl. Chunks of life are gone. I feel foggy and full of wonder.

What do I do now? What I thought, now is a dream. Is this just another switch to another person inside me or am I really here?

Father, forgive me for stealing so much time. It was not mine to take. Who am I to judge your creation?

A Daughter

(In the June newsletter, we printed a letter from a patient in which she described her great discomfort when she read negative things about her own therapist. The book Victims of Memory by Mark Pendergrast was specifically mentioned by her. Following is Pendergrast's reply.)

Dear Confused Patient:

Your letter in the May 1995 FMSF Newsletter complained that my book, VICTIMS OF MEMORY, had a terrible effect on you because I questioned the treatment approach of "Dr. Q," a specialist in multiple personality disorder. I do not know who Dr. Q may be, but he is probably Richard Kluft, Eugene Bliss, Frank Putnam, or Ralph Allison, all of whom I mentioned in the book. I am indeed extremely concerned about MPD specialists who appear to be creating a disease and then treating it. Of course, this is only my opinion, but it is backed up by considerable research. If you have read Chapter 6 in my book, you must know that. I was not attacking Dr. Q personally, nor do I know how he treated you as an individual patient. I am pleased that you were impressed with his "kindness, empathy and ethical behavior." I hope that he has not helped to convince you that you harbor multiple internal "alters" and that you were sexually abused all of your childhood but "dissociated" all of the abuse memories. You refer to having been molested as a child. If you have always remembered this abuse, I am sure that it occurred. Otherwise, I hope you will reexamine your beliefs in this matter.

I am somewhat mystified by your reaction to my book, however, which appears to have had a profound and inexplicable effect on you. You wrote: "After reading his name attacked in the book in question, I was so distressed that I was in the bathroom weeping. For the next month I had recurring crying spells and a few related nightmares. It was worse than the molestation I experienced as a child. I was not able to cope with the feelings and confusion triggered by seeing Dr. Q verbally attacked. I feel terribly unsafe in therapy with anyone."

I gather that you hold my scholarly book responsible for your having terminated therapy with Dr. Q, and for causing you to weep copiously and have nightmares. My message to you may sound harsh, but it is necessary: Stop being a victim. I wrote a well-researched book, which you are free to read and disregard if you wish. It did not cause you to quit therapy. You chose to do that on your own.

Yours,
Mark Pendergrast

A Different Reaction

I really believe that if VICTIMS OF MEMORY had been out there when I was still seeing my MPD therapist, that it would have made a difference in my life. It just addresses so many concerns that I had, I wouldn't have been able to live with the on-going questions my therapist refused to address.

Returning

I thought it was crazy that parents would welcome a child back without talking -- until it happened to me. It's a fragile thing. We don't want to challenge her now.

A Dad

A Rock and a Hard Place

At times it seems that spouses are between a rock and a hard place... I am not meaning to imply that we who are spouses have it worse than the parents who have been accused but we are affected for the rest of our lives. It is well-nigh impossible to remain on good terms with the in-laws if you want to be in good terms with your spouse. In my case, my wife is at least in communication with her parents though it is my impression that the whole issue has been conveniently 'swept under the rug' rather than having been dealt with in a mutually satisfying way. The strange thing is that the one who tried to support her the most from the beginning, is the one whom she pulled away from the most -- me. That has me baffled and the many letters I have written to her just do not get answered.

A Spouse

Mother's Day

Mother's Day had to be the most wonderful day of my life as "T" started to show human emotions of love, caring, sadness and pain. All we had seen for 20 months before had been rage and terror. Since then, through the social worker at the new hospital, we have been able to bring up real, valid problems in our relationship which we were unaware of but are now able to talk about. At times, my husband and I feel as though we are responsible for raising the most dysfunctional family in the state, but then the pendulum swings back to middle ground and we have to accept being "good enough" parents. We had always prided ourselves on parenting a super family and that will never change. However, this experience is a wake up call. We are thankful for the opportunity to have a second chance at improvement and change.

Out of our "coping" attempts, we feel that the factors which made this reconnection happen were the grace of God (and we are not overly religious people), your sense of urgency and the lawyer's advice that we send a sibling to simply do a "welfare check."

A Mom

Letting Anger Go

Nearly a year ago, our daughter visited our city with her husband and our grandson. Before they arrived, she contacted us, asking if we could all meet at her brother's home. I asked her if she had come to the conclusion that she had erred in her belief that her father had molested her. She was most emphatic that she had not changed her beliefs one iota. The result of this was that her father refused to see her. I did go and we met at the Zoo.

We have since visited with our daughter and her family in their town, and in their home. Our daughter appeared to have no problem seeing us, interacting with us and giving us all the time we wished to spend with our grandson. At the end of our visit, she actually asked her father if he would give her a hug. This should sound like the beginning of a resolution to the four years lost.

Our daughter began this nightmare after viewing Bradshaw tapes. In fact she gave the entire set to her brother when she told him of her "dreams." She told us all that we were a very dysfunctional family.

We think that our daughter has decided to get on with her life. We learned, however, that she is still seeing her therapist two times a week. My husband and I also want to get on with our lives. We have let our feelings of anger and pain dissipate; the alternative is bitterness.

A Mom

An Observation

As you know, I have a lot of friends out there who do therapy. The word I am getting is that the Frontline series has finally made a real impact upon the therapeutic community. Whether this is a concern about what they are doing and how, or merely a concern with image isn't clear.

A Professional

Confusing to Patients: A note to clinicians

"It must be confusing to a client when we accept the metaphorical value of alter states, and then as therapists we introduce the complicating factor of accepting as reality that which the alter states 'remember.' Persons who have developed the complex formulation of alter states as a way to protect the ego are probably well prepared to accept the metaphorical value of the memories of those very same alter states. As therapists, though, would we change the rules? They have given us a story, which has profound meaning. We need to help them figure out the meaning of that story. It must come as a shock to them when as therapists we suddenly stop working with the powerful mythology of their creative healing, and convey to them we are now committed to a divided kind of truth. When we accept the stories of Satanic ritual abuse as reality, we let them know that part of their story is real in one sense, and part of it is real in another sense."

Glen Peterson, Ph.D., Grand Rapids, MI

Comment on British Psychological Society Survey

I would like to comment on the "Dear Friends" article published in the July/August, 1995 FMS Foundation Newsletter. This article stated that the BPS conducted a survey of its 4005 clinical members to determine their views about the accuracy of recovered memories. With 1083 members responding, the BPS concluded that among qualified psychologists there is widespread belief in the accuracy of recovered memories of child sexual abuse. If the results were indeed based upon 1083 returned questionnaires, which is a response rate of 27%, we should question the generalizability of these findings to all BPS members, not to mention all qualified psychologists. It is very possible that the 73% who did not respond to the survey do not believe that recovered memories of CSA events from total amnesia can be taken as essentially accurate.

Leslie A. Miller, Rollins College

Update on Status of Some People in Prison

With the overturn of so many day-care cases in the past few months, readers might be interested in an update of a few other people who are still under arrest and whose cases have been in the news. The Newsletter has only mentioned the Amiraults and the Souzas in recent months.

George Franklin - Even though his conviction was overturned last spring, George Franklin remains in prison. His bail was set at \$1 million while the prosecution decides if and when it will retry the case.

Paul Ingram - remains in prison in Delaware. He has been studying data processing and programming and has also worked in the library. His case will be the subject of a movie this fall. A committee has formed to help Paul Ingram.

Frank Fuster - was convicted of molesting children in the Country Walk day care case which was prosecuted by Janet Reno. One of the witnesses, Iliana Flores-Fuster, has retracted her statement saying that it was made under extreme pressure. Reporter Debbie Nathan has investigated this case. A committee has formed to help Frank Fuster.

Jenny Wilcox - remains in prison in Ohio even though some of the children who originally brought accusations against her have retracted.

Bruce Perkins - was convicted of molesting his grandchildren and is in prison in Texas. With home and all other assets gone, his wife is now living with a friend. A committee has been formed to help Bruce Perkins.

Debbie Nathan, the reporter, has compiled a list of 100 people whose convictions of child molestation are such that new trials seem warranted.

A Concerned Reader

SEPTEMBER 1995 FMSF MEETINGS

FAMILIES, RETRACTORS & PROFESSIONALS
WORKING TOGETHER

key: (MO) = monthly; (bi-MO) = bi-monthly
CALL PERSONS LISTED FOR INFO & REGISTRATION

STATE MEETINGS

ILLINOIS - ILLINOIS FMS SOCIETY

Saturday, October 7 - 9:00 am-4:30 pm
Speakers: Richard Ofsha, Ph.D., Mark Pendergrast,
Eleanor Goldstein, and more!!
Eileen (708) 980-7693 or Liz (708) 827-1056

INDIANA - INDIANAPOLIS AREA

Sunday, October 29, 1995, 1pm
Nickie 317-471-0922(phone), 334-9838(fax)
or Pat 219-482-2847

PENNSYLVANIA, NEW JERSEY, DELAWARE, MARYLAND

Saturday, October 21, 9:30 am-4:00 pm
Sharaton Valley Forge (PA)
Jim & JoAnn 610-783-0396
or Lee & Sally 609-967-7812

WISCONSIN - MADISON AREA

Wisconsin FMS Society Meeting
Saturday, September 30 - 9:00 am-5:00 pm
Seminar Speakers: Brooks Brennells, Ph.D.,
Ethel Dunn, Eleanor Goldstein, Mark Pendergrast,
William Smoler, atty, and Darold A. Treffert, MD
\$30/person; \$50/couple-lunch included
Louise (414) 535-1804

UNITED STATES

ARIZONA - (bi-MO)

Phoenix Area
Barbara (602) 924-0975

ARKANSAS - LITTLE ROCK

Al & Lela (501) 363-4368

CALIFORNIA

NORTHERN CALIFORNIA

SAN FRANCISCO & BAY AREA (bi-MO)

EAST BAY AREA

Judy (510) 254-2605

SAN FRANCISCO & NORTH BAY

Gideon (415) 389-0254

Charles (415) 984-6626 (day); 435-9618 (eve)

SOUTH BAY AREA

Jack & Pat (408) 425-1430

Last Saturday, (bi-MO)

CENTRAL COAST

Carole (805) 967-8058

SOUTHERN CALIFORNIA

BURBANK (formerly VALENCIA)

Jane & Mark (805) 947-4376

4th Saturday (MO) 10:00 am

CENTRAL ORANGE COUNTY

Chris & Alan (714) 733-2925

1st Friday (MO) - 7:00 pm

ORANGE COUNTY (formerly LAGUNA BEACH)

Jerry & Eileen (714) 494-9704

3rd Sunday (MO) - 6:00 pm

COVINA GROUP (formerly RANCHO CUCAMONGA)

Floyd & Libby (818) 330-2321

1st Monday, (MO) 7:30 pm

COLORADO - DENVER

Ruth (303) 757-3622

4th Saturday, (MO) 1:00 pm

CONNECTICUT - NEW HAVEN/AREA CODE 203

Earl 329-8365 or Paul 458-9173

FLORIDA

DADE-BROWARD AREA

Madeline (305) 966-4FMS

DELRAY BEACH PRT

Esther (407) 364-8290

2nd & 4th Thursday(MO) 1:00 pm

TAMPA BAY AREA

Bob & Janet (813) 856-7091

ORLANDO AREA

Emerson (407) 672-3906

ILLINOIS

CHICAGO METRO AREA (South of the Eisenhower)

Roger (708) 366-3717

2nd Sunday [MO] 2:00 pm

INDIANA - INDIANA FRIENDS OF FMS

Nickie (317) 471-0922 (phone) 334-9839 (fax)
or Pat (219) 482-2847

IOWA - DES MOINES

Betty & Gayle (515) 270-6976

2nd Saturday (MO) 11:30 am Lunch

KANSAS - KANSAS CITY

Leslie (913) 235-0602

Pat (913) 738-4840 or Jan (816) 931-1340

KENTUCKY

LEXINGTON - Dixie (606) 356-9309

LOUISVILLE - Bob (502) 957-2378

Last Sunday (MO) 2:00 pm

MAINE - AREA CODE 207

BANGOR - Irvine & Arlene 942-8473

FREEPORT - Wally 865-4044

3rd Sunday (MO)

YARMOUTH - Betsy 846-4268

MARYLAND - ELLICOTT CITY AREA

Margie (410) 750-8694

MASSACHUSETTS / NEW ENGLAND

CHELMSFORD

Ron (508) 250-9756

MICHIGAN - GRAND RAPIDS AREA - JENISON

Catharine (616) 363-1354

1st Monday (MO) - please note meeting day

MINNESOTA - MINNEAPOLIS AREA

Terry & Collette (507) 642-3630

Dan & Joan (612) 631-2247

MISSOURI

KANSAS CITY

Pat (913) 738-4840 or Jan (816) 931-1340

2nd Sunday (MO)

ST. LOUIS AREA

Karen (314) 432-8789 or Mae (314) 837-1976

3rd Sunday (MO)

Retractors support group also meets

SPRINGFIELD - AREA CODES 417 AND 501

Dorothy & Pete (417) 882-1821

Howard (417) 865-6097

4th Sunday [MO] 5:30 pm

NEW JERSEY (So.) See WAYNE, PA

NEW YORK

DOWNSTATE NY - WESTCHESTER, ROCKLAND & OTHERS

Barbara (914) 761-3627 - call for bi-MO mtg info

UPSTATE / ALBANY AREA

Elaine (518) 399-5749 (bi-MO)

WESTERN/ROCHESTER AREA

George & Eileen (716) 586-79429 (bi-MO)

OKLAHOMA - OKLAHOMA CITY/AREA CODE 405

Len 364-4063 Dee 942-0531

HJ 755-3816 Rosemary 439-2459

PENNSYLVANIA

HARRISBURG AREA

Paul & Betty (717) 691-7660

PITTSBURGH

Rick & Renee (412) 563-5616

WAYNE (includes So. Jersey)

Jim & JoAnn (610) 783-0396

TENNESSEE - MIDDLE TENNESSEE

Kate (615) 665-1160

1st Wednesday (MO) 1:00 pm

TEXAS

CENTRAL TEXAS

Nancy & Jim (512) 478-8395

HOUSTON

Jo or Beverly (713) 464-8970

WISCONSIN

Katie & Leo (414) 476-0285

CANADA

BRITISH COLUMBIA

VANCOUVER & MAINLAND

Ruth (604) 925-1539

Last Saturday (MO) 1:00-4:00 pm

VICTORIA & VANCOUVER ISLAND

John (604) 721-3219

3rd Tuesday (MO) 7:30 pm

MANITOBA

WINNIPEG

Murel (204) 261-0212

ONTARIO

LONDON

Adrian (519) 471-6338

2nd Sunday: (bi-MO)

OTTAWA

Eileen (613) 836-3294

TORONTO - NORTH YORK

Pat (416) 444-9078

QUEBEC

MONTREAL

Alan (514) 335-0863

OVERSEAS

AUSTRALIA

Mrs. Irene Curtis, PO Box 630, Sunbury, Victoria 3419

Telephone (03) 9740 6930

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Task Force False Memory Syndrome of

"Ouders voor Kinderen"

Mrs. Anna de Jong, +31-20-693 5692

NEW ZEALAND

Mrs. Colleen Waugh, (09) 416-7443

UNITED KINGDOM

The British False Memory Society

Roger Scotford, +49-1225 868-682

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Deadline for OCTOBER 1995 Issue:

Wednesday, September 20th

Mark Fax or envelope "Attn: Meeting Notice"
& send 2 months before scheduled meeting.

**YOU MUST BE A STATE CONTACT OR GROUP LEADER
TO POST A MEETING NOTICE IN THIS NEWSLETTER**

IF YOU ARE INTERESTED IN BECOMING A CONTACT
WRITE:
VALERIE FLING, STATE CONTACT COORDINATOR, FMSF

Do you have access to e-mail? Send a message to
pjf@cis.upenn.edu

if you wish to receive electronic versions of this newsletter and notices of radio and television broadcasts about FMS. All the message need say is "add to the FMS list". You'll also learn about joining the FMS-Research list (it distributes research materials such as news stories, court decisions and research articles). It would be useful, but not necessary, if you add your full name (all addresses and names will remain strictly confidential).

The False Memory Syndrome Foundation is a qualified 501(c)3 corporation with its principal offices in Philadelphia and governed by its Board of Directors. While it encourages participation by its members in its activities, it must be understood that the Foundation has no affiliates and that no other organization or person is authorized to speak for the Foundation without the prior written approval of the Executive Director. All membership dues and contributions to the Foundation must be forwarded to the Foundation for its disposition.

The FMSF Newsletter is published 10 times a year by the False Memory Syndrome Foundation. A subscription is included in membership fees. Others may subscribe by sending a check or money order, payable to FMS Foundation, to the address below. 1995 subscription rates: USA: 1 year \$30, Student \$10; Canada: 1 year \$35 (in U.S. dollars); Foreign: 1 year \$40. (Single issue price: \$3 plus postage.

What IF?

What if, parents who are facing lawsuits and want legal information about FMS cases, had to be told, "I'm sorry, there isn't any such thing available?"

What if, your son or daughter began to doubt his or her memories and called FMSF only to get a recording, "This number is no longer in operation?"

What if, a journalist asks you where to get information about the FMS phenomenon, and you had to answer, "Sorry, I don't know?"

What if, you want to ask a question that only an expert, familiar with FMS can answer, and find out that FMSF can no longer provide that information? Where would you turn?

What if the False Memory Syndrome Foundation did not exist? A frightening thought, isn't it?

Please support our Foundation. We cannot survive without your support!

Reprinted from the August 1994 PFA (MI) Newsletter

YEARLY FMSF MEMBERSHIP INFORMATION

Professional - Includes Newsletter \$125
Family - Includes Newsletter \$100
Additional Contribution: _____

____ Visa: Card # & expiration date: _____
____ Mastercard: Card # & expiration date: _____
____ Check or Money Order: Payable to FMS Foundation in U.S. dollars

Please include: Name, address, state, country, phone, fax

FMS Foundation

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Pamela Freyd, Ph.D., Executive Director

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September 1, 1995

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